

In the United States Patent and Trademark Office

First/Sole Applicant: SCOTT MULLEN

Joint/Second Applicant: _____

Title: "VIRTUAL FIXTURING"

Small Entity Declaration—Independent Inventor(s)

As a below-named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35 United States Code, to the Patent and Trademark Office with regard to my above-identified invention described in the specification filed herewith. I have not assigned, granted, conveyed, or licensed—and am under no obligation under any contract or law to assign, grant, convey, or license—any rights in the invention to either (a) any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or (b) any concern which would not qualify as either (i) a small business concern under 37 CFR 1.9(d) or (ii) a nonprofit organization under 37 CFR 1.9(e).

Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed—or am under an obligation under contract or law to assign, grant, convey, or license—any rights in the invention is listed below:

☒ There is no such person, concern, or organization.

☐ Any applicable person, concern, or organization is listed below: *

Full Name: _____

Address: _____

I acknowledge a duty to file, in the above application for patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Scott Mullen
Signature of Sole/First Inventor

Signature of Joint/Second Inventor

SCOTT MULLEN
Print Name of Sole/First Inventor

Print Name of Joint/Second Inventor

2-11-4
Date of Signature

Date of Signature

*Note: A separate Small Entity Statement is required from any listed entity.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number or Bar Code Label ☐ OR ☒ Correspondence address below

Name SCOTT MULLEN

Address 110 W. BROADWAY

City JIM THORPE

State PA.

ZIP 18229

Country U.S.A.

Telephone (570) 325-5476

Fax —

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

SCOTT

Family Name
or Surname

MULLEN

Inventor's
Signature

Scott Mullen

Date 2-11-4

Residence: JIM THORPE

State PA

Country U.S.A.

Citizenship U.S.A.

Mailing Address 110 W. BROADWAY

City JIM THORPE

State PA.

ZIP 18229

Country U.S.A.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Family Name
or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.